

CALIFORNIA AND THE HIV/AIDS EPIDEMIC

Overview

To avert the serious personal and public health implications of HIV disease, the Department of Health Services (DHS), Office of AIDS positions itself at the forefront of the battle against the HIV/AIDS epidemic. The Office of AIDS' efforts target publicly-funded HIV/AIDS care and treatment programs and critical prevention strategies to interrupt HIV transmission.

AIDS and HIV Data and Estimates

AIDS Case Data

Although highly effective combination drug therapies have resulted in declines in AIDS-related deaths, the HIV/AIDS epidemic continues to be one of the most serious public health threats fa7cing California. As of September 30, 2001, California's cumulative reported AIDS cases totaled 122,837 and represented approximately 15.9% of all reported AIDS cases in the United States. Of these California cases, 75,045 AIDS-related deaths have occurred, for a case fatality of 61.1%.

Current AIDS surveillance reports show that 15.4% of the cumulative AIDS cases in California are among people 20-29 years of age, 44.8% among 30-39 year olds, and 27.1% among those 40-49 years old.

The risk groups and populations most affected by the HIV/AIDS epidemic are changing. The most recent surveillance data indicate that although white men who have sex with men (MSM) continue to represent the majority of reported AIDS cases each year, the proportions of new AIDS cases among people of color (including MSM of color), injection drug users and their sex partners, and women (especially African-American and Latino women) are increasing.

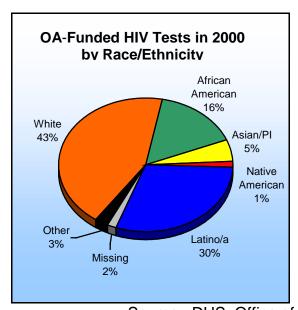
The challenge of the disproportionate impact of the AIDS epidemic in California's communities of color is clearly evident. As of September 30, 2001, the cumulative number of reported AIDS cases by race/ethnicity and age show that 40.1% of adult/adolescent cases and 72.3% of pediatric cases occurred in people of color. A comparison of the population versus the percent of AIDS cases for African Americans, Latinos, and whites is as follows:

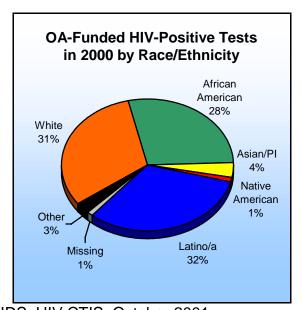
Race/Ethnicity	Percent of Population in 2000 Census	Percent of CA Cumulative Reported AIDS Cases	Percent of CA AIDS Cases Reported 10/00 – 9/01
African-American	6.4	17.3	22.3
Latino	32.3	20.3	29.7*
White	46.7	59.7	44.0

*1% decrease from cases reported for the previous 12 months. Source: DHS, Office of AIDS, HIV/AIDS Case Registry, October 2001

HIV Counseling and Testing Information System Data

Due to the potentially long incubation period between HIV infection and AIDS diagnosis (in some cases, up to 10 years), AIDS data alone do not fully reflect the extent of the epidemic. To a limited degree, HIV seroprevalence data are currently available in California through publicly funded counseling and testing sites. The HIV Counseling and Testing Information System (HIV CTIS) provides estimates of HIV incidence, prevalence, risk behavior, and demographic data for clients who test at these sites. Data from this system show that in 2000, publicly-funded counseling and testing sites administered 181,395 HIV antibody tests for a total of 2,264 (1.2%) HIV-positive results. The racial/ethnic breakdown of these tests, are as follows:





Source: DHS, Office of AIDS, HIV CTIS, October 2001

HIV Infection Estimates and HIV Reporting

The Office of AIDS estimates that more than 65,000 Californians are HIV-infected, not including people living with AIDS. Although AIDS is a reportable condition in California, the state currently does not have a reporting system for HIV infection. Regulations for a system to report HIV infection by non-name code are being developed for implementation during FY 2001-02. The proposed system will allow California to better monitor the epidemic and allocate treatment, education, and prevention resources. It will also provide the federal government with better funding guidelines by comparing California's reported HIV infections with other states.

Epidemiologic Research

Epidemiologic research helps the state to monitor and project the extent of the HIV/AIDS epidemic in California. Epidemiologic data assist in effectively targeting resources and strategies for HIV/AIDS education, prevention, care, and treatment. Both the state and federal governments fund epidemiologic studies that the Office of AIDS conducts in collaboration with other state organizations, local health departments, community-based organizations, and universities.

The Office of AIDS conducts or funds epidemiologic surveys of childbearing women, children under age 13, clients of sexually transmitted disease clinics, blood and plasma donors, injection drug users, civilian applicants for military services, and inmates entering the California correctional system. Additionally, the Office of AIDS is studying the prevalence of variant and drug resistant strains of HIV.

Education and Prevention

Although new drug therapies continue to improve the quality of life for many people living with HIV/AIDS, education and prevention are still considered to be effective tools for stopping the epidemic. The primary goals of the HIV prevention programs are to prevent HIV transmission, change individual attitudes about HIV and risk behaviors, promote the development of risk reduction skills, and change community norms that may sanction unsafe sexual and drug-taking behaviors.

The Office of AIDS collaborates with numerous organizations and agencies to develop and implement focused HIV prevention programs. These programs include, but are not limited to, street outreach, social marketing, school-based health education, HIV counselor and community health outreach worker training, partner counseling and referral services, the Perinatal HIV Testing Project, and publicly-funded HIV counseling and testing sites.

The Office of AIDS conducts intensive research and evaluation of the prevention interventions to develop effective strategies, ensure sound program implementation, and promote ongoing improvements in program quality.

Care and Treatment

The Office of AIDS seeks to ensure the provision of humane, cost-effective, and appropriate health and support service resources for persons with HIV along the entire continuum of care. To accomplish this goal, the Office of AIDS coordinates various programs that provide care and treatment services for eligible people infected with HIV and those who have developed AIDS-defining illnesses. These programs include the AIDS Drug Assistance Program (ADAP), the Early Intervention Program, the Comprehensive AIDS Resources Emergency Health Insurance Premium Payment Program, the local HIV Care Consortia Program, Housing Services, the Residential AIDS Licensed Facilities Program, the AIDS Case Management Program, and the AIDS Medi-Cal Waiver Program.

California has the largest state fund contribution for the support of AIDS drugs and has 145 drugs on its formulary, serving almost 24,000 eligible individuals with HIV disease.

Office of AIDS FY 2001-02 Budget

The total Office of AIDS budget for FY 2001-02 is \$276.65 million, with local assistance comprising more than \$258 million (excluding Medi-Cal and legislative mandates). Highlights of the Office of AIDS budget increase include a \$12.8 million augmentation to ADAP.

HIV/AIDS-Related Legislation

In 2001, Governor Davis signed a number of bills into law that refer to HIV/AIDS or may affect people living with HIV/AIDS. Brief descriptions of some of these bills are as follows:

AB 25 (Migden) - Domestic Partners

Makes provisions to existing laws on domestic partnerships to include authorization of a domestic partner to make medical treatment decisions on behalf of a patient in certain circumstances. Makes provisions in regard to conservatorships and health plan benefits.

AB 180 (Cedillo) - Charitable Thrift Stores

Revises the definition of a nonprofit organization to include those that provide services to people living with HIV/AIDS and extends the repeal date of the exemption to January 1, 2007.

AB 213 (Nation) - Mental Health – Records – Marriage and Family Therapists
Permits the disclosure of information or records when a patient, with the approval of the licensed marriage and family therapist who is in charge of the patient, designates persons to whom information or records may be released, including the designated officer of an emergency response employee, and from that designated officer to an emergency response employee regarding possible exposure to HIV or AIDS; but only to the extent necessary to comply with provisions of the Ryan White Comprehensive AIDS Resources Emergency Act of 1990.

AB 276 (Migden) - Discrimination Remedies

Extends to two years a limitation applicable to the issuance of all accusations for violations of the right to be free from violence or intimidation or threats of intimidation, including persons claiming to be aggrieved by HIV/AIDS discrimination.

AB 453 (Correa) - DNA Testing

Allows any forensic scientist, criminologist, toxicologist, forensic pathologist, or any employee required to perform DNA or forensic analysis who comes into contact with blood/bodily fluids within the scope of his or her duties to have the specimen tested for HIV. Prohibits the use of results as evidence in criminal or juvenile proceedings.

AB 1263 (Migden) - HIV Rapid Testing

Authorizes the California Department of Health Services to participate in a research program conducted with the federal Centers for Disease Control and Prevention involving innovative HIV testing and counseling programs. The legislation will additionally authorize the Department to implement a rapid HIV test program in testing sites designated by the Department, using specified tests, and in accordance with specified criteria.

AB 1424 (Thomson) - Mental Health

Amends existing law to allow disclosure of information to the designated officer of an emergency response employee, and from that designated officer to an emergency response employee regarding possible exposure to HIV or AIDS as it relates to evidence hearings for involuntary treatment due to mental illness.

AB 1490 (Thomson) - Internet Posting of Laboratory Results

Permits clinical laboratory test results to be delivered in electronic form if requested by a patient and if deemed appropriate by the health care provider. Specifically prohibits the electronic disclosure of results of an HIV antibody test to a patient, regardless of authorization.

SB 446 (Vasconcellos) - AIDS Vaccine

Requires health care service plans and disability insurers that provide coverage for hospital, medical, or surgery expenses to also provide coverage for an approved AIDS vaccine, as specified. The legislation does not apply to specified types of disability insurance policies.

SB 613 (Alarcon) - Medi-Cal Care Plans

Allows Medi-Cal managed care plans to help patients with disabilities complete and submit re-enrollment paperwork to ensure that they do not experience a gap in health care coverage.

Office of AIDS Web Site

The Office of AIDS Web site (http://www.dhs.ca.gov/AIDS/) is a valuable source for obtaining up-to-date HIV/AIDS information, including California AIDS case statistics; copies of California and the HIV/AIDS Epidemic: The State of the State Report, and A Brief Guide to CA HIV/AIDS Laws; HIV/AIDS research reports, and the latest information on California's upcoming HIV reporting regulations.